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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Latreace First name  Nicole Middle name  Wesley Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Latreace N Wesley Latreace Wesley	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9325	

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		About Debtor 1:	Α	bout Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	В	susiness name(s)			
		EINs	E	INs			
5.	Where you live	1418 Sterling Brooke Drive	If	Debtor 2 lives at a different address:			
		Powder Springs, GA 30127  Number, Street, City, State & ZIP Code	N	lumber, Street, City, State & ZIP Code			
		Cobb					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	ir	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	N	lumber, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	C	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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**Latreace Nicole Wesley** Debtor 1

Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

No.

Go to line 12.

Debtor

District

☐ Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

When

Relationship to you

Case number, if known

this bankruptcy petition.

Debtor 1 Latreace Nicole Wesley Case number (if known)

art	Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, State & ZIP Code			
	separate sheet and attach it to this petition.		y the appropriate boy to describe your business:				
				the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in t Code.				
		☐ Yes.	I am fi	ling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?			
	public health or safety? Or do you own any property that needs		If immed	iate attention is			
	immediate attention?		needed,	why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
				Number, Street, City, State & Zip Code			

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Debtor 1 Latreace Nicole Wesley

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are definal, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		ness debts? Business debts are debts t				
			□ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filling under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		you estimate that after any exempt propeable to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	□ 50,001-100,000			
		☐ 100-19		□ 10,001-25,000	☐ More than100,000			
		200-9	<del>3</del> 9					
19.	How much do you	<b>□</b> \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	to be?	<b>\$100,0</b>	001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,0	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	amined this petition, and I declar	e under penalty of perjury that the inform	nation provided is true and correct.			
				am aware that I may proceed, if eligible, of available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, pose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the cha	pter of title 11, United States Code, spec	ified in this petition.			
		bankrupto and 3571	cy case can result in fines up to \$	oncealing property, or obtaining money of 250,000, or imprisonment for up to 20 years.	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			eace Nicole Wesley e Nicole Wesley	Signature of Debtor	2			
			e of Debtor 1	Signature of Debitor	-			
		Executed	on <b>February 22, 2019</b>	Executed on				
	MM / DD / YYYY MM / DD / YYYY							

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Debtor 1 Latreace Nicole Wesley

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Celia R	l. Washington, GA Bar No.	Date	February 22, 2019
Signature of	f Attorney for Debtor		MM / DD / YYYY
Celia R. W	/ashington, GA Bar No. 044108		
Printed name			
Clark & W	ashington, L.L.C.		
Firm name			
3300 Norti	heast Expressway		
<b>Building 3</b>	3		
Atlanta, G	A 30341		
Number, Street,	, City, State & ZIP Code		
Contact phone	770-488-9338	Email address	cworders@cw13.com
044108 G	<b>A</b>		
Bar number & S	State		

# 

		ation to identify you				
Debt	tor 1	Latreace Nicole First Name	Wesley Middle Name	Last Name		
Debt						
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT (	OF GEORGIA - ATLANTA DI	VISION	
Case (if kno	e number					Check if this is an amended filing
Sta Be as	s complete a	of Financial	Affairs for Individual ble. If two married people a attach a separate sheet to	are filing together, both are	equally responsible for sup	
Part		,	rital Status and Where You	Lived Before		
1. '	What is your	current marital statu	s?			
	■ Married □ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you li	ived in the last 3 years. Do no	ot include where you live now	:	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne			
	☐ Yes. Mal	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	the Sources of You	r Income			
l	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-	time activities.	ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,186.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incon Check all that app		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)			■ Wages, commissions, bonuses, tips	\$100,343.00	☐ Wages, commi bonuses, tips	ssions,	
			☐ Operating a business		☐ Operating a bu	siness	
		dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$97,768.00	☐ Wages, commi bonuses, tips	ssions,	
			☐ Operating a business		☐ Operating a bu	siness	
5.	Include include and other winnings.  List each s	come regardless of whe public benefit payments f you are filing a joint c	me during this year or the two ether that income is taxable. Exa s; pensions; rental income; inter ase and you have income that y come from each source separa	amples of other income are a rest; dividends; money collect you received together, list it of	alimony; child support cted from lawsuits; roy only once under Debt	yalties; and or 1.	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incon Describe below.	ne	Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December 31, 2018 )	Separated Non-filing Spouse's Income	\$30,000.00			
		dar year before that: December 31, 2017)	Separated Non-filing Spouse's Income	\$20,000.00			
Par	t 3: List	Certain Payments Vo	ou Made Before You Filed for	Rankruntov			
6.		•	2's debts primarily consume				
<b>.</b>	□ No.	Neither Debtor 1 nor	Debtor 2 has primarily consumated a personal, family, or household	umer debts. Consumer debi	ts are defined in 11 U.	.S.C. § 10 <sup>-</sup>	1(8) as "incurred by an
		During the 90 days be	efore you filed for bankruptcy, di e 7.	d you pay any creditor a tota	al of \$6,425* or more?	•	
		paid that not include	veach creditor to whom you pai creditor. Do not include paymer le payments to an attorney for the ent on 4/01/19 and every 3 year	nts for domestic support obliq his bankruptcy case.	gations, such as child	support a	nd alimony. Also, do
	Yes.		e or both have primarily consultions you filed for bankruptcy, di		al of \$600 or more?		
		□ No. Go to line	e 7.				
		include pa	veach creditor to whom you pai ayments for domestic support o or this bankruptcy case.				
	Creditor'	s Name and Address	Dates of payme	ent Total amount	Amount you N	Was this p	eayment for

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Debtor 1 Latreace Nicole Wesley

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Pacific Union Financial Attn: Bankruptcy 1603 Lbj Freeway, Suite 500 Farmers Branch, TX 75234	02/2019 \$ 01/2019 \$ 1838 12/2018 \$ 1838	\$0.00	\$244,130.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
LendingPoint LLC. Attn: Bankruptcy 1201 Roberts Blvd Suite 200 Kennesaw, GA 30144	02/2019 \$ 0 01/2019 \$ 0 12/2018 \$ 600 11/2018 \$ 600	\$600.00	\$12,535.00	☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
Opportunity Financial, LLC 130 East Randolph Street Suite 3400 Chicago, IL 60601	02/2019 \$ 0 01/2019 \$ 0 12/2018 \$ 300 11/2018 \$ 300	\$600.00	\$2,749.00	☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
of which you are an officer, director, person a business you operate as a sole proprieto alimony.  No  Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or  No Yes. List all payments to an insider				ccount of a debt that benefited
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
rt 4: Identify Legal Actions, Repossess	sions, and Foreclosures	•		
Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes.				
List all such matters, including personal inj				

Case number

7.

8.

Debtor 1	Latreace Nicole Wesley	Document	Page 11 of 70 Case number (if known)	
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10.	Within 1 year before you filed for bankru Check all that apply and fill in the details bel		was any of your property repossessed, foreclose	d, garnished, attache	d, seized, or levied?	
	<ul><li>No. Go to line 11.</li><li>☐ Yes. Fill in the information below.</li></ul>					
			Describe the Property	Date	Value of the	
			Explain what happened		property	
11.	Within 90 days before you filed for bankr accounts or refuse to make a payment be  No  Yes. Fill in the details.	uptcy	, did any creditor, including a bank or financial in	stitution, set off any	amounts from your	
	Creditor Name and Address	C	Describe the action the creditor took	Date action was taken	Amount	
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or No Yes		was any of your property in the possession of an ther official?	assignee for the ben	efit of creditors, a	
Par	t 5: List Certain Gifts and Contribution	s				
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$60 per person		, did you give any gifts with a total value of more Describe the gifts	than \$600 per person  Dates you gave the gifts	? Value	
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?					
	Yes. Fill in the details for each gift or co			Dates you	Value	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value	
	Seven Springs Church DTP - Powder Springs		Tithes & Offerings	02/2017-02/20 19	\$12,000.00	
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	ptcy (	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,	
	No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	

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Debtor 1 Latreace Nicole Wesley

Par	7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr	reparin	g a bankruptcy p	etition?			rty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
	CIN Legal Data Services Box 88229 Milwaukee, WI 53288		Credit Counse	ling & Credit Re	ports	02/2019	\$70.00
	Clark & Washington, LLC 3300 Northeast Expressway Building 3 Atlanta, GA 30341		Chapter 7 Filin	g Fees		02/2019	\$335.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your creding to not include any payment or transfer that you	itors or	to make paymen			or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre  No Yes. Fill in the details.	busine made a	ess or financial af as security (such as	fairs? the granting of a se			
	Person Who Received Transfer Address  Person's relationship to you		Description and property transfe		payment	e any property or ts received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankr beneficiary? (These are often called asset-₁ ■ No □ Yes. Fill in the details.			ny property to a s	elf-settled t	rust or similar device	of which you are a
	Name of trust		Description and	value of the prope	erty transfe	rred	Date Transfer was made
Par	8: List of Certain Financial Accounts,	Instrum	nents, Safe Depos	it Boxes, and Stor	rage Units		
20.	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass	tcy, we	ere any financial a	ccounts or instrur	ments held of deposit;		
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of accouninstrument	С	Pate account was losed, sold, noved, or	Last balance before closing or transfer

transfer

moved, or

transferred

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	cash, or other valuables?			
	■ No			
	☐ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
	Do you hold or control any property that someo for someone.	one else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Antoine Wesley Sr Unknown	Debtor Residence	2013 Chevrolet Tahoe	\$0.00
	Fannie Mae 3900 Wisconsin Avenue Washington, DC 20016	Debtor's Residence	Work Laptop	\$250.00
Par	t 10: Give Details About Environmental Informa	ation		
For t	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
Repo	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

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25.	Hav	ve you notified any governmental unit of	f any	release of hazardous material?				
		No Yes. Fill in the details.						
		ime of site Idress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice	
26.	Hav	ve you been a party in any judicial or ad	lminis	strative proceeding under any env	riron	mental law? Include settlements	and orders.	
		No Yes. Fill in the details.						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11	Give Details About Your Business or	r Con	nections to Any Business				
27.	Wit	hin 4 years before you filed for bankrup  A sole proprietor or self-employed  A member of a limited liability com	in a t	rade, profession, or other activity	, eith	ner full-time or part-time	y business?	
		<ul><li>□ A partner in a partnership</li><li>□ An officer, director, or managing ex</li></ul>	xecut	ive of a corporation				
		☐ An owner of at least 5% of the votin	ng or	equity securities of a corporation	١			
		No. None of the above applies. Go to	Part	12.				
		Yes. Check all that apply above and fil	ll in tl	he details below for each busines	s.			
	Ad	dress		scribe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.		
	(140	misor, street, sity, state and En Sodo)	INA	me of accountant or bookkeeper		Dates business existed		
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties.	otcy, o	did you give a financial statement	to a	nyone about your business? Incl	ude all financial	
		No Yes. Fill in the details below.						
	Ad	nme Idress Imber, Street, City, State and ZIP Code)	Da	te Issued				
Par	t 12	Sign Below						
are t with	rue a b	ead the answers on this <i>Statement of Fi</i> and correct. I understand that making a ankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	a false	e statement, concealing property,	or o	btaining money or property by fr		
Lat	rea	reace Nicole Wesley ce Nicole Wesley ıre of Debtor 1		Signature of Debtor 2				
Dat	е _	February 22, 2019	_	Date				
Did : ■ N □ Y	0	attach additional pages to Your Statem	ent o	f Financial Affairs for Individuals	Filin	g for Bankruptcy (Official Form 1	07)?	
Did :		pay or agree to pay someone who is no	ot an a	attorney to help you fill out bankru	uptc	y forms?		
ΠY	es. I	Name of Person Attach the <i>Bankro</i> orm 107 <b>State</b> n		Petition Preparer's Notice, Declaration Financial Affairs for Individuals Filing			page	

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#### 

Case	19-32939-31113 DUC 1	Document Page 16 of 70	2/13 10.34.24	Desc Main
Fill in this inforn	nation to identify your case and tl			
Debtor 1		3		
Debior 1	Latreace Nicole Wesley First Name Middl	e Name Last Name		
Debtor 2				
Spouse, if filing)	First Name Middl	e Name Last Name		
Jnited States Bar	nkruptcy Court for the: NORTHER	RN DISTRICT OF GEORGIA - ATLANTA DIVISIO	N	
Case number				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
	e A/B: Property	an asset only once. If an asset fits in more than one		12/15
nformation. If more	e space is needed, attach a separate s tion.	le. If two married people are filing together, both are heet to this form. On the top of any additional pages ther Real Estate You Own or Have an Interest In		
. Do you own or h	ave any legal or equitable interest in a	any residence, building, land, or similar property?		
☐ No. Go to Part	12.			
Yes. Where is	s the property?			
	ing Brooke Drive if available, or other description	What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
			Current value of the	Current value of the
Powder Sp	prings GA 30127-0000	☐ Land	entire property?	portion you own?
City	State ZIP Code	☐ Investment property	\$305,000.00	\$152,500.00
		☐ Timeshare ☐ Other	Describe the nature of y	
		Who has an interest in the property? Check one	a life estate), if known.	nancy by the entireties, or
		Debtor 1 only	Joint Tenancy	
Cobb		Debtor 2 only		
County		Debtor 1 and Debtor 2 only	☐ Check if this is con	nmunity property
		At least one of the debtors and another	(see instructions)	,, ,
		Other information you wish to add about this iten property identification number:	n, such as local	
		property identification number.		
	• •	or all of your entries from Part 1, including any		\$152,500.00
pages you ha	ave attached for Part 1. Write that	number here	=>	Ψ132,300.00
Part 2: Describe	Your Vehicles			
ס אסון משח ווסע מו	se, or have legal or equitable inter	rest in any vehicles, whether they are registere	ed or not? Include any v	ehicles you own that
		ort it on Schedule G: Executory Contracts and Une		omoloo you own mat
Cars, vans, tri	ucks, tractors, sport utility vehicle	es. motorcycles		
. Jui J, vali J, tit	aono, maororo, oport amily verifold			
■ No				

Official Form 106A/B Schedule A/B: Property page 1

☐ Yes

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#### □ No É

⊔ No

Yes. Describe.....

Clothes \$200.00

#### 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

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Case number (if known) Document Debtor 1 **Latreace Nicole Wesley** 

	Tiffan	y Bracelet and N	lecklace	\$250.00
		,		<u>`</u>
13. <b>Non-farm animals</b> <i>Examples:</i> Dogs, cat	ts. birds. ho	rses		
■ No	,,			
☐ Yes. Describe				
14. Any other personal	and house	hold items you did	not already list, including any health aids you did no	ot list
■ No				
☐ Yes. Give specific	information	••••		
15. Add the dollar value	ue of all of	vour entries from F	Part 3, including any entries for pages you have attac	ched
				\$3,250.00
Part 4: Describe Your Fin Do you own or have an			any of the following?	Current value of the
Do you own or nave an	y legal of e	equitable interest in	rany of the following:	portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b>				
Examples: Money yo	ou have in y	our wallet, in your h	ome, in a safe deposit box, and on hand when you file yo	our petition
□ No ■ Yes				
_ 100				
			Cash	\$0.00
			counts; certificates of deposit; shares in credit unions, bross with the same institution, list each.  Institution name:	okerage houses, and other similar
	17.1.	Checking	Navy Federal	\$0.00
	17.2.	Savings	Navy Federal	\$0.00
				<u> </u>
18. <b>Bonds, mutual fund</b> <i>Examples:</i> Bond fund ■ No			okerage firms, money market accounts	
☐ Yes		Institution or issuer	name:	
joint venture	stock and	interests in incorp	orated and unincorporated businesses, including ar	າ interest in an LLC, partnership, and
■ No □ Yes. Give specific	information	about them		
- 103. Olve specific		me of entity:	% of ownersh	ip:
Negotiable instrume Non-negotiable instr	nts include	personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
<ul><li>■ No</li><li>☐ Yes. Give specific i</li></ul>	nformation	ahout them		
- 103. Give specific i		uer name:		

Official Form 106A/B Schedule A/B: Property page 3 Case 19-52939-sms Doc 1 Filed 02/22/19 Entered 02/22/19 16:34:24 Desc Main Document Page 19 of 70 Case number (if known)

	Latieace Nic	DIE WESIEY			
21	□ No	RA, ERISA, Keogh, 401(k	s), 403(b), thrift savings ac	ecounts, or other pension or pro	ofit-sharing plans
	Yes. List each account	separately.  Type of account:	Institution name	e:	
		401 (k)	Fidelty		\$0.00
22		I deposits you have made		e service or use from a compar , gas, water), telecommunicatio	
	☐ Yes		Institution name	e or individual:	
23	B. Annuities (A contract for No			or for a number of years)	
		uer name and description			
24	<ol> <li>Interests in an educatio</li> <li>26 U.S.C. §§ 530(b)(1), 5</li> <li>■ No</li> </ol>		a qualified ABLE progra	m, or under a qualified state	tuition program.
	☐ Yes Ins	titution name and descrip	otion. Separately file the re	ecords of any interests.11 U.S.	C. § 521(c):
25	■ No		y (other than anything li	sted in line 1), and rights or p	powers exercisable for your benefit
	☐ Yes. Give specific info				
26	<ul> <li>Patents, copyrights, tra         Examples: Internet dom     </li> <li>No</li> </ul>		s, and other intellectual page ceeds from royalties and		
	☐ Yes. Give specific info	rmation about them			
27	_ ' "			oldings, liquor licenses, profess	ional licenses
	<ul><li>■ No</li><li>□ Yes. Give specific info</li></ul>	rmation about them			
N	loney or property owed to	you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.
28	3. Tax refunds owed to yo	ou			
	■ No	rmation about them, inclu	iding whether you already	filed the returns and the tax ye	pare
	Tes. Give specific fillo	matter about them, more	ding whether you already	med the returns and the tax ye	
29	). Family support Examples: Past due or I	ump sum alimony, spous	al support, child support,	maintenance, divorce settleme	nt, property settlement
	■ No □ Yes. Give specific info	mation			
30				s, sick pay, vacation pay, work	ers' compensation, Social Security
	■ No □ Yes. Give specific info	·			
31	. Interests in insurance p Examples: Health, disab  ☐ No		alth savings account (HSA	A); credit, homeowner's, or rent	er's insurance
	Yes. Name the insurar		cy and list its value.		
Of	ficial Form 106A/B	Company name:	Schedule A/B: Prop	Beneficiary: erty	Surrender or refund page 4

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Case number (if known) Document

Debtor 1 **Latreace Nicole Wesley** 

			value:
	PriMerica Term Life Insurance	Antoine Wesley Sr	\$0.00
	Any interest in property that is due you from someone who has die If you are the beneficiary of a living trust, expect proceeds from a life in someone has died.  No Yes. Give specific information		eive property because
•	Claims against third parties, whether or not you have filed a lawsui Examples: Accidents, employment disputes, insurance claims, or rights  No  Yes. Describe each claim		
		and the state of t	a and aff alabasa
	Other contingent and unliquidated claims of every nature, including No	g counterclaims of the deptor and rights to	) Set off claims
	Yes. Describe each claim		
35.	Any financial assets you did not already list		
	No		
	Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including a for Part 4. Write that number here		\$0.00
Part	5: Describe Any Business-Related Property You Own or Have an Interest	In. List any real estate in Part 1.	
37. <b>C</b>	Oo you own or have any legal or equitable interest in any business-related p	roperty?	
	No. Go to Part 6.		
	Yes. Go to line 38.		
Part	16: Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46. I	Do you own or have any legal or equitable interest in any farm- or o	commercial fishing-related property?	
	■ No. Go to Part 7.		
	☐ Yes. Go to line 47.		
Part	Describe All Property You Own or Have an Interest in That You Dic	d Not List Above	
	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership		
	No		
L	Yes. Give specific information		
54.	Add the dollar value of all of your entries from Part 7. Write that n	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5 

Debtor 1	Latreace Nicole Wesley	Document	Page 21 of 70 Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55 Part	1: Total real estate, line 2			\$152 500 00

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$152,500.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$3,250.00		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$3,250.00	Copy personal property total	\$3,250.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$155,750.00

Official Form 106A/B Schedule A/B: Property page 6 Case 19-52939-sms Doc 1 Filed 02/22/19 Entered 02/22/19 16:34:24 Desc Main

Fill in this infor	mation to identify your			. 0	
Debtor 1	Latreace Nicole V	Vesley			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANT	A DIVISION	
Case number					
(if known)					Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$152,500.00		\$21,500.00	O.C.G.A. § 44-13-100(a)(1)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$750.00		\$750.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	O.C.G.A. § 44-13-100(a)(6)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
	\$152,500.00 \$2,000.00 \$50.00	\$2,000.00 \$\$50.00 \$\$200.00 \$\$200.00	Check only one box for each exemption.  \$152,500.00  \$100% of fair market value, up to any applicable statutory limit  \$2,000.00  \$750.00  \$100% of fair market value, up to any applicable statutory limit  \$750.00  \$100% of fair market value, up to any applicable statutory limit  \$50.00  \$100% of fair market value, up to any applicable statutory limit  \$50.00  \$100% of fair market value, up to any applicable statutory limit  \$50.00  \$200.00  \$200.00  \$200.00

Debto	Latreace Nicole Wesley			Case number (if known)		
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only	one box for each exemption.		
	iffany Bracelet and Necklace ne from Schedule A/B: 12.1	\$250.00	\$250.00		O.C.G.A. § 44-13-100(a)(5)	
	THE HOLL COLLEGATE PAR. 12.1	☐ 100% of fair market value, up to any applicable statutory limit				
	re you claiming a homestead exemption					
(S	Subject to adjustment on 4/01/19 and every	3 years after that for ca	ses filed on	or after the date of adjustmen	nt.)	
(S		3 years after that for ca	ses filed on	or after the date of adjustmen	nt.)	
(S	Subject to adjustment on 4/01/19 and every  No	•		,	,	
Ì	Subject to adjustment on 4/01/19 and every  No	•		,	,	

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		Document	Page 2	4 of 70		
Fill in this information t	o identify you	r case:				
Debtor 1 Latr	reace Nicole	Waslay				
First N		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First N	Name	Middle Name	Last Name			
United States Bankruptcy	v Court for the	NORTHERN DISTRICT OF C	SEORGIA - AT	I ANTA DIVISION		
Office Glates Barikruptes	y Court for the.	NORTHERN BIOTHOT OF	SECITOR 70	L/WY// DIVIDIOI		
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
O# 1 1 = 400	_					
Official Form 106	<u>5D</u>					
Schedule D: C	reditors	Who Have Claims	Secure	d by Propert	V	12/15
		f two married people are filing toge out, number the entries, and attach				
number (if known).	mai i age, illi it t	out, number the entires, and attach	it to this form.	on the top of any addition	nai pages, write your na	ille alla case
1. Do any creditors have cla	aims secured by	your property?				
□ No. Check this ho	x and submit th	nis form to the court with your other	er schedules '	You have nothing else t	o report on this form	
_		•	ci scricduics.	Tod flave flottling cise t	o report on this form.	
Yes. Fill in all of the	ne information l	pelow.				
Part 1: List All Secur	red Claims					
2. List all secured claims.	If a creditor has r	nore than one secured claim, list the c	reditor separate	ly Column A	Column B	Column C
for each claim. If more than	one creditor has	a particular claim, list the other credite	ors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the cla	aims in alphabetion	cal order according to the creditor's na	ime.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Pacific Union Fi	nancial	Describe the property that secure	s the claim:	\$244,130.00	\$305,000.00	\$0.00
Creditor's Name		1418 Sterling Brooke Drive	Powder			·
Attn: Bankruptc	у	Springs, GA 30127 Cobb (				
1603 Lbj Freewa	ıy, Suite	As of the data was file the plains in				
500		As of the date you file, the claim is apply.	S: Check all that			
Farmers Branch	ı, TX	Contingent				
75234						
Number, Street, City, Stat	e & Zip Code	☐ Unliquidated				
Who owes the debt? Che	ook on o	☐ Disputed  Nature of lien. Check all that apply	,			
_	ck one.	_				
Debtor 1 only			s mortgage or se	ecured		
Debtor 2 only		_				
Debtor 1 and Debtor 2 or	•	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
At least one of the debtor		☐ Judgment lien from a lawsuit				
☐ Check if this claim related community debt	tes to a	☐ Other (including a right to offset)				
community debt						
	Opened					
	07/15 Last		4040			
Date debt was incurred	Active 02/19	Last 4 digits of account nu	mber 1010			
Silverbrooke						
2.2 Homeowners				<b>#0.00</b>	<b>\$205.000.00</b>	<b>#0.00</b>
Association, Inc	;	Describe the property that secure		\$0.00	\$305,000.00	\$0.00
Creditor's Name		1418 Sterling Brooke Drive				
All-In-One Comr	•	Springs, GA 30127 Cobb (	County			
Management, RA		As of the date you file, the claim is	S: Check all that			
Suite 701	<b>21</b>	apply.				
Dallas, GA 3015	7	☐ Contingent				
Number, Street, City, Stat		☐ Unliquidated				
•	•	☐ Disputed				
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply	<i>1</i> .			
Debtor 1 only		■ An agreement you made (such a	s mortgage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 or	nly	☐ Statutory lien (such as tax lien, m	nechanic's lien)			

Schedule D: Creditors Who Have Claims Secured by Property

☐ Judgment lien from a lawsuit

lacksquare At least one of the debtors and another

Official Form 106D

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Debtor 1	Latreace Nicole Wesley			Case number (if known)	
	First Name	Middle Name	Last Name		
	if this claim relates to unity debt	a Other (inc	cluding a right to offset)		
Date debt	was incurred	Last	4 digits of account number		
Add the	dollar value of your e	ntries in Column A on th	nis page. Write that number here	e: \$244,130.00	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			ue totals from all pages.	\$244,130.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				Document	Page 26 of	70	-			
Fil	I in this informa	ation to identify your	case:							
De	ebtor 1	Latreace Nicole W	/eslev							
		First Name		Name	Last Name					
	ebtor 2 oouse if, filing)	First Name	Middle	Name	Last Name					
Un	nited States Bank	cruptcy Court for the:	NORTHE	RN DISTRICT OF (	GEORGIA - ATLANTA	DIVISION				
	ase number								if this is an	l
Sc		F: Creditors W							12/15	
any Sch Sch left.	executory contra nedule G: Executo nedule D: Creditor	accurate as possible. Us cts or unexpired leases ry Contracts and Unexpi s Who Have Claims Sect nuation Page to this pag per (if known).	that could re ired Leases ( ured by Prop	esult in a claim. Also (Official Form 106G). erty. If more space is	list executory contract Do not include any cre s needed, copy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out,	Property (Of secured clain number the	ficial Fori ims that a entries ir	m 106A/B) a re listed in n the boxes	and on on the
Pa	rt 1: List All	of Your PRIORITY Un	secured CI	aims						
1.	Do any creditors	s have priority unsecured	d claims aga	inst you?						
	☐ No. Go to Par	t 2.								
	Yes.									
2.	identify what type possible, list the o	riority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priority er according to	nand nonpriority amount the creditor's name.	ints, list that claim here a If you have more than tw	nd show both priority a	and nonpriori	ity amount	ts. As much	as
		on of each type of claim, s								
		,			,	Total claim	Priority amount		Nonpriorit amount	У
2.1	Georgia I	Department of Reve	enue	Last 4 digits of acco	ount number	\$0.00		\$0.00		\$0.00
	Compliar	nce Division		When was the debt i	incurred?		-			
	1800 Cen	inkruptcy itury BLVD NE Suit 3A 30345-3202	e 9100							
	Number Stre	eet City State Zlp Code		As of the date you fi	le, the claim is: Check a	all that apply				
	Who incurred t	the debt? Check one.		☐ Contingent						
	Debtor 1 onl	у		☐ Unliquidated						
	Debtor 2 onl	у		☐ Disputed						
	Debtor 1 and	d Debtor 2 only		Type of PRIORITY u	nsecured claim:					
	☐ At least one	of the debtors and anothe	er	☐ Domestic support	obligations					
	☐ Check if this	s claim is for a commun	nity debt	■ Taxes and certain	other debts you owe the	government				
	Is the claim su		-		or personal injury while yo	•				
	■ No			Other. Specify						

**Notice Only** 

☐ Yes

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Debto	Latreace Nicole Wesley		Case number (if known)	
2.2	IRS	Last 4 digits of account number	\$0.00	\$0.00 \$0.00
	Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room	When was the debt incurred?		
	Atlanta, GA 30308  Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
V	Vho incurred the debt? Check one.	☐ Contingent		
ı	Debtor 1 only	☐ Unliquidated		
[	☐ Debtor 2 only	☐ Disputed		
_	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
_	☐ At least one of the debtors and another	☐ Domestic support obligations		
_	☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government	
	s the claim subject to offset?	☐ Claims for death or personal injury	· ·	
I	No	☐ Other. Specify		
[	☐Yes	Notice only		
un tha	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each cl an one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims already in	cluded in Part 1. If more
4.1	Amex	Last 4 digits of account number	7483	\$1,090.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim i	Opened 10/15 Last Active 1/22/19	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No		<b>01</b> ,	
	☐ Yes	Other. Specify Credit Card		

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Document of 70 Debtor 1 Latreace Nicole Wesley Case number (if known) 4.2 \$5,000.00 **Big Picture Loans** Last 4 digits of account number Nonpriority Creditor's Name PO Box 704 When was the debt incurred? Watersmeet, MI 49969 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Loan ☐ Yes 4.3 **BYL Collections** \$83.00 Last 4 digits of account number 7823 Nonpriority Creditor's Name 301 Lacey Street When was the debt incurred? **Opened 04/17** Floor 2 West Chester, PA 19382 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Novasom ☐ Yes 4.4 **Capital One** Last 4 digits of account number \$6,839.00 0354 Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/12 Last Active Po Box 30285 When was the debt incurred? 01/19 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Latreace Nicole Wesley

Description: Description of the control of the c

4.5	Capital One	Last 4 digits of account number	6984	\$446.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/16 Last Active 1/04/19	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Citibank North America Nonpriority Creditor's Name	Last 4 digits of account number	7998	\$1,110.00
	Citibank Corp/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 04/17 Last Active 12/18	
	St Louis, MO 63179  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.7	Citibank/Sears	Last 4 digits of account number	0816	\$709.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6275 Sioux Falls, SD 57117	When was the debt incurred?	Opened 04/16 Last Active 02/19	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?  No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	= -	

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Page 30 of 70 Case number (if known) Document Debtor 1 Latreace Nicole Wesley 4.8 \$866.00 Comenity Bank/Torrid Last 4 digits of account number 6003 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 12/15 Last Active Po Box 182125 When was the debt incurred? 01/19 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.9 **Credit One Bank** Last 4 digits of account number 3487 \$2,431.00 Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 06/13 Last Active Po Box 98873 When was the debt incurred? 01/19 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 Creditors Bureau Assoc \$69.00 2665 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 8/08/18 Last Active 420 College St When was the debt incurred? 02/18 Macon, GA 31201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only

Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community

debt Is the claim subject to offset?

■ No ☐ Yes ☐ Disputed Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

**Medical Debt Medical** Other. Specify

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Discover Financial	Last 4 digits of account number	1672	\$6,324.0
Nonpriority Creditor's Name	_	On an ad 05/40 L and Andrea	
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 05/16 Last Active 12/18	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Fingerhut	Last 4 digits of account number	7444	\$345.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250	When was the debt incurred?	Opened 04/18 Last Active 1/06/19	
Saint Cloud, MN 56395  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Genesis Bc/celtic Bank	Last 4 digits of account number	8673	\$261.0
Nonpriority Creditor's Name Attn: Bankruptcy 268 South State Street Ste 300 Salt Lake City, UT 84111	When was the debt incurred?	Opened 07/18 Last Active 1/04/19	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
☐ At least one or the deptors and another ☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

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Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

□ Debtor 1 only □ Contingent
□ Debtor 2 only □ Unliquidated
□ Debtor 1 and Debtor 2 only □ Disputed
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

□ Debts to pension or profit-sharing plans, and other similar debts
□ Other. Specify Loan

■ No

T Yes

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4.1 7	Medical Data Systems (MDS)	Last 4 digits of account number	0006	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312	When was the debt incurred?	Opened 7/30/18 Last Active 09/16	
	Vero Beach, FL 32960  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	og plans, and other similar debts	
	☐ Yes	·	Attorney Paulding Hospital	
	□ res	Other. Specify Conection I	Attorney Faululing Hospital	
4.1 8	Medical Data Systems (MDS)	Last 4 digits of account number	6810	\$100.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960	When was the debt incurred?	Opened 7/02/18 Last Active 03/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Cobb Hospital	
4.1	No. 1. A		0005	<b>*</b> 40.054.00
9	Navient Nonpriority Creditor's Name	Last 4 digits of account number	0805	\$13,254.00
	Attn: Bankruptcy Po Box 9000	When was the debt incurred?	Opened 12/06 Last Active 1/21/19	
	Wiles-Barr, PA 18773  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educationa		

Official Form 106 E/F

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☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Unsecured	ration agreement or divorce that you did not
Nordstrom FSB  Nonpriority Creditor's Name	Last 4 digits of account number	6833
Attn: Bankruptcy Po Box 6555 Englewood, CO 80155	When was the debt incurred?	Opened 10/14 Last Active 01/19
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not
■ No	Debts to pension or profit-sharin	g plans, and other similar debts
☐ Yes	■ Other. Specify Credit Card	l

**OneMain Financial** 3821 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/18 Last Active 601 Nw 2nd Street When was the debt incurred? 01/19 Evansville, IN 47708 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Unsecured

report as priority claims

Is the claim subject to offset?

4.2 2

debt

■ No

☐ Yes

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\$2,308.00

\$9,054.00

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4.2 3	Opportunity Financial, LLC	Last 4 digits of account number	4896	\$2,749.00
	Nonpriority Creditor's Name 130 East Randolph Street Suite 3400 Chicago, IL 60601	When was the debt incurred?	Opened 10/18 Last Active 01/19	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?  —	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify		
4.2	Republic Finance	Last 4 digits of account number	6195	\$4,703.00
	Nonpriority Creditor's Name 793 Whitlock Ave Nw Marietta, GA 30064	When was the debt incurred?	Opened 12/18 Last Active 2/01/19	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.2	Rise	Last 4 digits of account number	3994	\$4,448.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 101808	When was the debt incurred?	Opened 07/18 Last Active 12/07/18	
	Fort Worth, TX 76185  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Unsecured		
	☐ Yes	Other. Specify		

Case 19-52939-sms Doc 1 Filed 02/22/19 Entered 02/22/19 16:34:24 Document Debtor 1 Latreace Nicole Wesley Case number (if known) 4.2 Synchrony Bank/ JC Penneys 5302 \$994.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 04/14 Last Active Po Box 965060 When was the debt incurred? 12/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Charge Account 4.2 Synchrony Bank/Sams 5452 \$485.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/16 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 02/19 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/Walmart 9733 \$351.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 01/17 Last Active Po Box 965060 When was the debt incurred? 01/19 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes

☐ Student loans  $\square$  Obligations arising out of a separation agreement or divorce that you did not

report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Account

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Page 37 of 70 Case number (if known) Document Debtor 1 Latreace Nicole Wesley 4.2 **Target** 8347 \$1,572.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/17 Last Active Po Box 9475 When was the debt incurred? 01/19 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card Visa Dept Store National 4.3 1080 \$472.00 0 Bank/Macy's Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/14 Last Active Po Box 8053 When was the debt incurred? 01/19 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** Domestic support obligations 6a. 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6с 0.00 6d. 6d Other. Add all other priority unsecured claims. Write that amount here. 0.00 0.00 6e. Total Priority. Add lines 6a through 6d. 6e.

Total claims from Part 2

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that

Student loans

6f

**Total Claim** 

13,254.00

6f.

6g.

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Debtor 1 Latreace Nicole Wesley

	you did not report as priority claims		 0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 80,355.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 93,609.00

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Fill in this infor	mation to identify your	case:		•
Debtor 1	Latreace Nicole V	Vesley		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA	DIVISION
Case number				
(if known)		-1		

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

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		Docume	ent Page 40 c	of 70	
Fill in this	s information to identify your	case:			
Debtor 1	Latreace Nicole V	Moslov			
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION	
Case num	hher				
(if known)					☐ Check if this is an
					amended filing
- · · ·	. = 40011				
	ll Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
	e and case number (if known) you have any codebtors? (If			as a codebtor.	
<b>=</b>					
■ No □ Yes					
L TE	5				
	thin the last 8 years, have you na, California, Idaho, Louisiana				y states and territories include
■ No	. Go to line 3.				
	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	o. Dia your opouco, formor opo-	aco, or logal equivalent liv	o man you at ano anno.		
in line Form	e 2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID O. I			editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, line	e
	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	е
	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		

C:III	in this information to identify your ca	200								
	otor 1 Latreace Nic									
	otor 2 use, if filing)				_					
Uni	ted States Bankruptcy Court for the	NORTHERN DISTRIC	CT OF GEORGIA	- ATLANTA						
	se number 		-					ed filing ent showir	ng postpetition	
0	fficial Form 106I						MM / DD/ `		J	
S	chedule I: Your Inco	ome					WIIVI 7 227			12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. (  11: Describe Employment  Fill in your employment	are married and not fili r spouse is not filing w	ng jointly, and y ith you, do not i onal pages, writ	our spouse nclude infor	is li mat	ving w ion ab	ith you, incl out your sp number (if	ude infor ouse. If m known). <i>I</i>	mation about ore space is Answer every	your needed,
	information.		Debtor 1				<u> </u>		iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Empl	•		
	information about additional employers.		☐ Not employ	ed			⊔ Not e	mployed		
	Include part-time, seasonal, or	Occupation	QC Underwr	iter			-			
	self-employed work.	Employer's name	Federal Nati Association	onal Morto	gag	•				
	Occupation may include student or homemaker, if it applies.	Employer's address	1100 15th St Washington		5					
		How long employed t	here? 7 ye	ears						
Pai	t 2: Give Details About Mon	thly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing	to report for	any	line, w	rite \$0 in the	space. In	clude your no	n-filing
	u or your non-filing spouse have mo		ombine the inform	ation for all	emp	loyers	or that perso	on on the I	ines below. If	you need
	, , , , , , , , , , , , , , , , , , , ,					For I	Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	9	i	8,079.00	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	·	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	9	8	,079.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Latreace Nicole Wesley	_	Case	number ( <i>if known</i>	) _			
				For	Debtor 1		For Debtor	pouse	
	Cop	y line 4 here	4.	\$	8,079.00	<u> </u>	\$	N/A	-
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5a. 5b. 5c. 5d. 5e. 5f.	\$ \$ \$ \$	1,440.00 161.00 322.00 446.00 655.00	) ) )	\$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	- - -
	5g.	Union dues	5g.	\$	0.00	_	\$	N/A	_
	5h.	Other deductions. Specify:	5h.+		0.00	+	\$	N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,024.00	_	\$	N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,055.00	<u> </u>	\$	N/A	
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	)	\$ \$ \$ \$ \$ \$	N/A N/A N/A N/A	-
	8g. 8h.	Other monthly income. Specify:	8g. 8h.+	· —	0.00		·	N/A N/A	-
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	_ 	\$	N/A	<u> </u>
10.		•	10. \$	į	5,055.00 +	\$	N/A	= \$ _	5,055.00
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	5,055.00
13.	Doy	you expect an increase or decrease within the year after you file this form	?					Combine month!	ned y income
		No. Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2

Fill in	n this informa	tion to identify yo	our case:					
Debte		Latreace Nic		lev		Chec	k if this is:	
Debto	or 2			,			An amended filing	ving postpotition aboutor
	use, if filing)						A supplement snov 13 expenses as of	ving postpetition chapter the following date:
Unite	d States Bankr	uptcy Court for the:		HERN DISTRICT OF GEOR TA DIVISION	RGIA -	-	MM / DD / YYYY	
Case (If kn	number own)							
		rm 106J						
		J: Your I		<b>1SES</b> . If two married people ar	a filing together be	th are equa	ully rosponsible fo	12/1
info	rmation. If m		eded, atta	ach another sheet to this				
Part		ibe Your House	hold					
1.	Is this a join  ■ No. Go to							
			n a separ	ate household?				
	□ N	-						
	□ Ye	es. Debtor 2 mus	t file Offic	ial Form 106J-2, Expenses	for Separate House	hold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		12	■ Yes □ No
					Son		14	■ Yes
								□ No
					Son		19	Yes
					Son		21	□ No ■ Yes
								■ res
					Son		2 1/2	■ Yes
3.	expenses of	enses include f people other the d your depende	nan _	No l Yes				
Part	2: Estim	ate Your Ongoi	ng Month	ly Expenses				
expe				uptcy filing date unless y cy is filed. If this is a supp				
Incli	ıda avnansa	s naid for with r	non-cash	government assistance i	f vou know			
the v	alue of such	n assistance and	d have in	cluded it on Schedule I: )	our Income		Your expe	enses
4.		r home owners d any rent for the		nses for your residence. In principle.	nclude first mortgage	4. \$		1,838.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
	•	•		r's insurance upkeep expenses		4b. \$ 4c. \$		0.00 50.00

Debtor 1	Latreace Nicole Wesley	Case number (if known)	
5. <b>Add</b>	itional mortgage payments for your residence, such as home equity loans	5. \$	0.00

6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	220.00 154.00 0.00 320.00 179.00 33.00 50.00 200.00 650.00 70.00 50.00 0.00 100.00 0.00 265.00
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d.		154.00 0.00 320.00 179.00 33.00 50.00 72.00 70.00 50.00 200.00 0.00 100.00
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d.		154.00 0.00 320.00 179.00 33.00 50.00 72.00 70.00 50.00 200.00 0.00 100.00
7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 320.00 179.00 33.00 50.00 200.00 650.00 72.00 70.00 50.00 0.00
7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	320.00 179.00 33.00 50.00 200.00 650.00 72.00 70.00 50.00 0.00
7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	179.00 33.00 50.00 200.00 650.00 72.00 70.00 50.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	33.00 50.00 200.00 650.00 72.00 50.00 200.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00 200.00 650.00 72.00 50.00 200.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 650.00 72.00 70.00 50.00 200.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	650.00 72.00 70.00 50.00 200.00 0.00 100.00
9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	72.00 70.00 50.00 200.00 0.00 100.00
10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	70.00 50.00 200.00 0.00 100.00
11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00 200.00 0.00 0.00 100.00
12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 0.00 0.00 100.00 0.00
13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 100.00 0.00
13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 100.00 0.00
14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$	0.00 100.00 0.00
15a. 15b. 15c. 15d.	\$ \$ \$	100.00 0.00
15b. 15c. 15d.	\$	0.00
15b. 15c. 15d.	\$	0.00
15b. 15c. 15d.	\$	0.00
15c. 15d.	\$	
15d.	· -	265.00
	\$	
16.		57.00
	\$	0.00
	•	
17a.	·	0.00
17b.	·	0.00
17c.	·	500.00
17d.	\$	0.00
18	\$	0.00
10.		0.00
10	Ψ	0.00
-	our Incomo	
		0.00
		0.00
	·	0.00
	· -	
		0.00
		0.00
21.	+\$	0.00
	<b>S</b>	5,055.00
		5,000100
	·	F 055 00
	<b>a</b>	5,055.00
l	L	
23a.	\$	5,055.00
		5,055.00
	7	3,033.00
23c.	\$	0.00
٠	-	
		or decrease because
	17c. 17d. 18. 19. 1: Ye 20a. 20b. 20c. 20d. 20e. 21.	17c. \$

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		3	
Fill in this infor	rmation to identify your case:		
Debtor 1	Latreace Nicole Wesley		
<b>D</b> 1	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States B	ankruptcy Court for the: NORTHERN DI	STRICT OF GEORGIA - ATLANTA DIVISION	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	orm 108		
<b>Stateme</b>	nt of Intention for Indi	ividuals Filing Under Chapte	er 7
	dividual filing under chapter 7, you must	fill out this form if:	
_	ve claims secured by your property, or	not evaluad	
-	sed personal property and the lease has is form with the court within 30 days afte	not expired. er you file your bankruptcy petition or by the date s	et for the meeting of creditors,
	ever is earlier, unless the court extends	the time for cause. You must also send copies to th	
	eople are filing together in a joint case, I nd date the form.	both are equally responsible for supplying correct i	nformation. Both debtors must
•		is needed, attach a separate sheet to this form. On	the ten of any additional pages
	your name and case number (if known).	is needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	our Creditors Who Have Secured Claims	2	
1. For any credi		D: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the c	reditor and the property that is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
		Scoures a dest:	as exempt on ochedule of
Creditor's	Pacific Union Financial	По	П.,
name:	Facilic Official Financial	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
		Retain the property and enter into a	Yes
Description o	f 1418 Sterling Brooke Drive Powder Springs, GA 30127	Reaffirmation Agreement.	
property securing debt	Cabb Caupty	☐ Retain the property and [explain]:	
Craditaria	Silverbrooke Homeowners		Пм
	Silverbrooke Homeowners Association, Inc	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	,		Yes
Description o	f 1418 Sterling Brooke Drive	Retain the property and enter into a Reaffirmation Agreement.	

Part 2: List Your Unexpired Personal Property Leases

Powder Springs, GA 30127

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

**Cobb County** 

Will the lease be assumed?

Official Form 108

property

securing debt:

Debtor 1	Latreace Nicole Wesley	Case number (if known)
Lessor's n		□ No
Descriptio Property:	n of leased	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	n on leaseu	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	Ti di lodoca	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	11 01 10 00 00	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:	11 01 10 00 00	☐ Yes
Lessor's n	ame: n of leased	□ No
Property:		☐ Yes
Lessor's n	ame: n of leased	□ No
Property:		☐ Yes
Part 3:	Sign Below	
Under pen	alty of perjury, I declare that I have indicated m	y intention about any property of my estate that secures a debt and any personal
	atreace Nicole Wesley	X
	eace Nicole Wesley ature of Debtor 1	Signature of Debtor 2
Date	February 22, 2019	Date

### Case 19-52939-sms Doc 1 Filed 02/22/19 Entered 02/22/19 16:34:24 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Latreace Nicole V	Vesley		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA	DIVISION
Case number				
(if known)				☐ Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	152,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,250.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	155,750.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	244,130.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	93,609.00
	Your total liabilities	\$	337,739.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,055.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,055.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	nersonal	. family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Latreace Nicole Wesley

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,079.00

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,254.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	13,254.00

Fill in this infor	mation to identify your	case:			
Debtor 1					
Debior	Latreace Nicole V	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA I	DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
You must file thi	is form whenever you fi	le bankruptcy schedule n connection with a ban		laking a false stateme	ent, concealing property, or or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out ban	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				otcy Petition Preparer's Notice, ad Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules filed v	with this declaration a	and
X /s/ Lat	reace Nicole Wesley		X		
	ace Nicole Wesley		Signature of De	ebtor 2	
Signatu	re of Debtor 1		-		
Date	February 22, 2019		Date		

Fill in thi	s information to identify your case:		Ch	eck one box	only as d	irected in this form and	l in Form
Debtor 1	Latreace Nicole Wesley		122	2A-1Supp:			
Debtor 2 (Spouse, if				■ 1. There	is no pres	umption of abuse	
United S	NORTHERN DISTANCE Bankruptcy Court for the:  NORTHERN DISTANCE GEORGIA - ATLA		_     '	applie	s will be m	o determine if a presur nade under <i>Chapter 7</i> cial Form 122A-2).	•
Case nu (if known)	imber					does not apply now be service but it could ap	
				☐ Check i	f this is a	n amended filing	
<u>Offici</u>	al Form 122A - 1						
Chap	oter 7 Statement of Your Cui	rrent Mor	nthly Inc	ome			12/15
attach a s case num	nplete and accurate as possible. If two married people separate sheet to this form. Include the line number to viber (if known). If you believe that you are exempted frogonilitary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	vhich the additior m a presumption	nal information a of abuse becau	applies. On the second	he top of ar	ny additional pages, writ narily consumer debts o	te your name and or because of
1. <b>W</b> h	nat is your marital and filing status? Check one or	าly.					
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fill or	ut both Columns	A and B, lines	2-11.			
	Married and your spouse is NOT filing with you.	You and your s	spouse are:				
l	$\square$ Living in the same household and are not lega	ally separated.	Fill out both Co	lumns A and	d B, lines 2	2-11.	
I	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are I living apart for reasons that do not include evadir	egally separated	d under nonban	kruptcy law	that applie	es or that you and your	
101(10 the 6 r	the average monthly income that you received from all DA). For example, if you are filing on September 15, the 6-m nonths, add the income for all 6 months and divide the total es own the same rental property, put the income from that p	nonth period would by 6. Fill in the re	be March 1 throusult. Do not include	ugh August 3° de any income	1. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ur gross wages, salary, tips, bonuses, overtime, roll deductions).	and commission	ons (before all	\$ 8,	079.00	\$	
3. Ali	mony and maintenance payments. Do not include lumn B is filled in.	payments from	a spouse if	\$	0.00	\$	
<b>of</b> y from and	amounts from any source which are regularly pyou or your dependents, including child support man unmarried partner, members of your household roommates. Include regular contributions from a spect in. Do not include payments you listed on line 3.	. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
5. <b>Ne</b>	t income from operating a business, profession,						
Ord	oss receipts (before all deductions) dinary and necessary operating expenses	\$ 0.00 -\$ 0.00	copy here ->	¢	0.00	\$	
	t monthly income from a business, profession, or far t income from rental and other real property	m \$	Copy Here ->	Ψ		Ψ	
U. 14C	t moomo nom rentar and other real property	Deb	otor 1				
Gro	oss receipts (before all deductions)	\$ 0.00					
	dinary and necessary operating expenses	-\$ 0.00		_			
Ne	t monthly income from rental or other real property	\$0.00	Copy here ->		0.00	\$	
7. Inte	erest, dividends, and royalties			\$	0.00	φ	

Official Form 122A-1

Document Page 52 of 70

Latreace Nicole Wesley

Case number (if known)

						Column A Debtor 1		Column E Debtor 2 non-filin		
8. <b>U</b> r	employ	ment compensation			\$	1	0.00	\$		
		er the amount if you contend that the amo Security Act. Instead, list it here:	ount received was a	benefit unde	er					
	For you <sub></sub>		\$	0.00						
		spouse								
be	nefit und	r retirement income. Do not include any ler the Social Security Act.			\$	i	0.00	\$		
Do red do	not include not in		al Security Act or pa humanity, or interna on a separate page	ayments ational or	\$	i	0.00	\$		
					\$	`	0.00	\$		
	— To	otal amounts from separate pages, if any			. \$		0.00	\$		
					- Ψ	<u> </u>	1 [	<u> </u>		
		your total current monthly income. Adn. Then add the total for Column A to the			8,	079.00	+ -		. = \$	8,079.00
							J L		Total o	current monthly
Part 2:	Dete	ermine Whether the Means Test Applie	es to You						IIICOIII	•
12. <b>C</b> a	lculate y	your current monthly income for the y	ear. Follow these st	eps:						
12	a. Copy	your total current monthly income from li	ne 11			Сору	line 11 l	nere=>	\$	8,079.00
	Multip	ly by 12 (the number of months in a year	)						X	12
12	b. The re	esult is your annual income for this part o	f the form					1:	2b. \$	96,948.00
13. <b>C</b> a	ilculate t	the median family income that applies	to you. Follow thes	se steps:						
Fill	I in the s	tate in which you live.	GA							
Fill	l in the n	umber of people in your household.	6							
То	find a lis	nedian family income for your state and s st of applicable median income amounts, n. This list may also be available at the b	go online using the		in b	the separa	te instruc	1: tions	3. \$	97,310.00
14. <b>H</b> c	w do th	e lines compare?								
14	a. <b>=</b>	Line 12b is less than or equal to line 13 Go to Part 3.	3. On the top of page	e 1, check box	x 1,	There is r	o presum	ption of ab	use.	
14	b. 🗆	Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check	box 2, The p	resi	umption of	abuse is	determined	by Form 1	22A-2.
Part 3:	Sign	n Below								
	By sig	ning here, I declare under penalty of per	jury that the informa	tion on this st	tate	ment and i	n any atta	achments is	true and c	orrect.
	Y /s/	Latreace Nicole Wesley								
	Lat	treace Nicole Wesley nature of Debtor 1								
D	ate Fel	bruary 22, 2019								
		checked line 14a, do NOT fill out or file F	orm 122A-2.							
	If you	checked line 14b, fill out Form 122A-2 ar	nd file it with this for	m.						

Debtor 1

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Fill in this information to identify you	r case:	Check the appropriate box as direct
Debtor 1 Latreace Nicole We	sley	lines 40 or 42:
Debtor 2 (Spouse, if filing)		According to the calculations require Statement:
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	■ 1. There is no presumption of about
Case number(if known)		2. There is a presumption of abus
(ii iulo iii)		☐ Check if this is an amended filing

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
☐ 2. There is a presumption of abuse.

#### Official Form 122A - 2

#### **Chapter 7 Means Test Calculation**

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Pai	tt 1: Determine Your Adjusted Income	
1.	Copy your total current monthly income. Cop	py line 11 from Official Form 122A-1 here=> \$ 8,079.00
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part household expenses of you or your dependents. Follow these	
	On line 11, Column B of Form 122A–1, was any amount of the inexpenses of you or your dependents?	come you reported for your spouse NOT regularly used for the household
	■ No. Fill in 0 for the total on line 3.  ☐ Yes. Fill in the information below:	
	Tes. Fill in the information below.	
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax of support other than you or your dependents.	debt or to Fill in the amount you are subtracting from your spouse's income
	support earlor and rived or your doportuonio.	\$
		\$
		\$
	Total.	\$ 0.00
		Copy total here=> \$ 0.00
	A Production of the Production	\$ 8,079.00
4.	Adjust your current monthly income. Subtract line 3 from line	1. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Official Form 122A-2

Debtor 1	Case 19-52939-sms  Latreace Nicole Wesley	Doc 1		Entered 02/22/19 16: age 54 of 70	34:24	Desc N	⁄lain
Part 2:	Calculate Your Deductions	from Your Ir	ncome				
to and instru Deduction	swer the questions in lines 6-15 actions for this form. This information the expense amounts set out in actual expenses if they are higher	5. To find the mation may lines 6-15 re than the star	e IRS standards, go onli also be available at the egardless of your actual e ndards. Do not deduct an	xpense. In later parts of the form, amounts that you subtracted fro	e separate you will use your spous	e some of se's	
	ŕ		,	ed from in income in lines 5 and 6	01101111 122	ZA-1.	
	·		, , ,		s filled in.		
F	Fill in the number of people who colus the number of any additional	e expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of all expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.  Denses differ from month to month, enter the average expense.  This part of the from refers to <i>you</i> , it means both you and your spouse if Column B of Form 122A-1 is filled in.  Inumber of people used in determining your deductions from income  In the number of people who could be claimed as exemptions on your federal income tax return, the number of any additional dependents whom you support. This number may be different from umber of people in your household.					
Natio	nal Standards You mus	st use the IRS	S National Standards to a	nswer the questions in lines 6-7.			
	Food, clothing, and other items Standards, fill in the dollar amount			red in line 5 and the IRS National		\$	2,408.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age		
7a. Out-of-pocket health care allowance per person	\$ 52	<u>.</u>
7b. Number of people who are under 65	X6	
7c. Subtotal. Multiply line 7a by line 7b.	\$ 312.00	Copy here=> \$ <u>312.00</u>
People who are 65 years of age or older		
7d. Out-of-pocket health care allowance per person	\$114	<u>L</u>
7e. Number of people who are 65 or older	X0	
7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$	Copy here=> +\$
7g. Total. Add line 7c and line 7f		\$312.00 Copy total here=> \$312.00

Debtor 1 Latreace Nicole Wesley

Case number (if known)

Loc	al St	andards	You must use the IRS Local Standards to ans	swer the c	uestions in lir	nes 8-15.				
			tion from the IRS, the U.S. Trustee Program ses into two parts:	n has divi	ded the IRS L	₋ocal Stand	lard for h	nousing for		
		•	tilities - Insurance and operating expenses tilities - Mortgage or rent expenses							
To a	answ	er the qu	estions in lines 8-9, use the U.S. Trustee Pro	ogram ch	art.					
			o online using the link specified in the separate be available at the bankruptcy clerk's office.	e instructio	ons for this for	m.				
8.			utilities - Insurance and operating expense mount listed for your county for insurance and							723.00
9.	Hou	ising and	utilities - Mortgage or rent expenses:							
	9a.		e number of people you entered in line 5, fill in your county for mortgage or rent expenses				\$	1,477.00		
	9b.	Total ave	erage monthly payment for all mortgages and c	other debts	s secured by y	our home.				
		contractu	late the total average monthly payment, add all lally due to each secured creditor in the 60 mo uptcy. Then divide by 60.							
		Name of	the creditor	Average paymer	e monthly nt					
		Pacific	Union Financial	\$	1,838.00					
			Total average monthly payment	\$	1,838.00	Copy here=>	-\$	1,838.00	Repeat this amount on line 33a.	
	9c.	Net mort	gage or rent expense.							
			line 9b (total average monthly payment) from I xpense). If this amount is less than \$0, enter \$0			\$		0.00 Copy here=>	• \$	0.00
10.			hat the U.S. Trustee Program's division of t liculation of your monthly expenses, fill in a				ng is inco	orrect and	\$	0.00
	Ex	plain why:								
11.	Loc	al transp	ortation expenses: Check the number of vehi	cles for wi	nich you claim	an ownersh	hip or ope	erating expense		
		). Go to lin	e 14.							

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$ 226.00

■ 1. Go to line 12.

2 or more. Go to line 12.

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			Documen	ii Paye 50 C				
ebtor 1	Latre	ace Nicole Wesley			Case number (i	f known)		
13.	You may	ownership or lease expens not claim the expense if you n two vehicles.						
Ve	hicle 1	Describe Vehicle 1:						
13a.	Ownersh	ip or leasing costs using IRS	Local Standard		\$	0.00		
13b.	_	monthly payment for all debt	•					
	To calcul are contr	ate the average monthly pay actually due to each secured cy. Then divide by 60.	ment here and on line		nat			
	Nan	ne of each creditor for Veh	icle 1	Average monthly payment				
	-NC	ONE-		\$				
		Total Avera	ge Monthly Payment	\$	Copy here =>	\$	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease exp line 13b from line 13a. if this		, enter \$0.	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:						
13d.	Ownersh	ip or leasing costs using IRS	Local Standard		\$	0.00		
13e.	Average leased ve	monthly payment for all debtehicles.	s secured by Vehicle 2	. Do not include costs f	or			
	Nan	ne of each creditor for Veh	icle 2	Average monthly payment				
				\$				
		Total Avera	ge Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease exp line 13e from line 13d. if this		, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ansportation expense: If your tation expense allowance re				rds, fill in the	Public \$	0.00
15.	also dedu	al public transportation ex uct a public transportation ex more than the IRS Local St	pense, you may fill in w	hat you believe is the a				0.00

Debtor 1 Latreace Nicole Wesley Case number (if known)

Oth		In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, social your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, al security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 m the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	1,440.00
17.	Involuntary deductions: The contributions, union dues, and	ne total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	onthly premiums that you pay for your own term life insurance. If two married people are ents that you make for your spouse's term life insurance. Do not include premiums for life its, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.	. ,	The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month  as a condition for your jol	ly amount that you pay for education that is either required:		
	for your physically or mer	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	·	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	\$	650.00
	, ,	any elementary or secondary school education.	Ψ	
22.	that is required for the health	enses, excluding insurance costs: The monthly amount that you pay for health care and welfare of you or your dependents and that is not reimbursed by insurance or paid. Include only the amount that is more than the total entered in line 7.		
	Payments for health insuran	ce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents	<b>lephone services:</b> The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of d by your employer.		
		basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses all Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	5,759.00

Debtor 1 Latreace Nicole Wesley Case number (if known)

Additional Expense Deductions These are additional deductions allowed by the Means Test.					
	Note: Do not include a	ny expense allowances	isted in lines 6-24.		
25.	5. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, your dependents.				
	Health insurance	\$ 655.00			
	Disability insurance	\$0.00			
	Health savings account	+ \$0.00			
	Total	\$ 655.00	Copy total here=>	\$	655.00
	Do you actually spend this total amount?				
	□ No. How much do you actually spend?  Yes	\$			
26.	Continued contributions to the care of household o continue to pay for the reasonable and necessary care your household or member of your immediate family whinclude contributions to an account of a qualified ABLE	r family members. The and support of an elderly to is unable to pay for su	c, chronically ill, or disabled member of ch expenses. These expenses may	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably n safety of you and your family under the Family Violence	, , ,	•		
	By law, the court must keep the nature of these expense	es confidential.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy colline 8.	sts are included in your i	nsurance and operating expenses on		
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.	more than the home en	ergy costs included in expenses on line		
	You must give your case trustee documentation of your amount claimed is reasonable and necessary.	actual expenses, and yo	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who are \$160.42* per child) that you pay for your dependent chil public elementary or secondary school.				
	You must give your case trustee documentation of your claimed is reasonable and necessary and not already a				
	* Subject to adjustment on 4/01/19, and every 3 years a	after that for cases begun	on or after the date of adjustment.	\$	0.00
30.	<b>Additional food and clothing expense.</b> The monthly a higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	in the IRS National Stan			
	To find a chart showing the maximum additional allowar instructions for this form. This chart may also be available				
	You must show that the additional amount claimed is re	asonable and necessary		\$	0.00
31.	<b>Continuing charitable contributions.</b> The amount tha instruments to a religious or charitable organization. 26		tribute in the form of cash or financial	+\$	0.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	655.00

Debtor 1 Latreace Nicole Wesley Case number (if known)

Dedu	ctions for Debt Payment						
	or debts that are secured by an inter ans, and other secured debt, fill in li	est in property that you own, including honnes 33a through 33e.	ne mort	tgages, vehicle			
	o calculate the total average monthly pareditor in the 60 months after you file for	ayment, add all amounts that are contractually r bankruptcy. Then divide by 60.	due to	each secured			
	Mortgages on your home:					verage monthly ayment	
33a.	Copy line 9b here				=> \$	1,838.00	_
	Loans on your first two vehicles:						
33b.	Copy line 13b here				=> \$	0.00	_
33c.	Copy line 13e here			:	=> \$	0.00	_
33d.	List other secured debts:						
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes insurance?			
				□ No			
-	-NONE-	_			\$		_
				□ No			
				☐ Yes	\$		
-				— П Na			-
				□ No			
-				□ Yes	+\$		-
33e.	Total average monthly payment. Add	ines 33a through 33d	\$_	1,838.00	Copy total here=>	\$1,838.00	0_
		B secured by your primary residence, a veh support or the support of your dependents?			_		
	No. Go to line 35.						
		st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> e information below.					
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount	
-NO	NE-		:	\$ .	÷ 60 = \$	5	
					٦		-
		То	tal \$_	0.00	Copy total here=>	. \$0.	.00
		ns a priority tax, child support, or alimony - ur bankruptcy case? 11 U.S.C. § 507.	that				
	No. Go to line 36.						
		these priority claims. Do not include current of sthose you listed in line 19.					
	Total amount of all past-due	priority claims	\$_	0.00	÷ 60 =	\$0.	.00

Debtor 1	Latro	eace Nicole Wesley		С	ase n	umber (if known)			
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 1 information, go online using the link for Bankruptcy Bas ns for this form. Bankruptcy Basics may also be available.	ics spe						
	l No.	Go to line 37.							
	Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing under	r Chap	ter 13	\$	500	0.00		
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for di and North Carolina) or by the Executive Office for Unite (for all other districts).	stricts i	n Alabama	X	6.50			
		To find a list of district multipliers that includes your dist the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.					c	Copy total	
		Average monthly administrative expense if you were fili	ng und	ler Chapter 13		\$ 32.5	_	ere=> \$	32.50
		of the deductions for debt payment. s 33e through 36.						\$	1,870.50
Total	Deduc	tions from Income							
38. <b>A</b>	dd all c	f the allowed deductions.							
		e 24, All of the expenses allowed under IRS e allowances	\$_	5,759.0	00				
(	Copy lin	e 32, All of the additional expense deductions	\$_	655.0	00				
(	Copy lin	e 37, All of the deductions for debt payment	+\$_	1,870.5	50_	٦			
		Total deductions	\$_	8,284.5	50_	Copy total he	ere	=> \$	8,284.50
Part 3:	Det	ermine Whether There is a Presumption of Abuse							
39. <b>C</b>	alculat	e monthly disposable income for 60 months							
;	39a. Co	py line 4, adjusted current monthly income	\$_	8,079.0	00				
;	39b. Co	py line 38, Total deductions	-\$_	8,284.5	50				
;		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$_	-205.5	50	Copy here=>\$		-205.50	
ı	or the	next 60 months (5 years)					x 60		
;	39d. <b>To</b>	tal. Multiply line 39c by 60		39d. \$	-12	2 330 OO	Copy nere=>	\$	-12,330.00
40. <b>F</b> i	nd out	whether there is a presumption of abuse. Check the	box tha	at applies:					
	I The I	ine 39d is less than \$7,700*. On the top of page 1 of th	is form	, check box 1, T	here	is no presum	ption of	fabuse. Go to	Part 5.
		ine 39d is more than \$12,850*. On the top of page 1 of if you claim special circumstances. Go to Part 5.	this fo	rm, check box 2,	, The	ere is a presur	nption (	of abuse. You	may fill out
	] The I	ine 39d is at least \$7,700*, but not more than \$12,850	)*. Go t	o line 41.					
*5	Subject	to adjustment on 4/01/19, and every 3 years after that fo	r cases	s filed on or after	r the	date of adjust	ment.		

Debtor 1	Latr	eace Nicole Wesley	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$x .25	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(Multiply line 41a by 0.25	(I)	copy ere=> \$
25	% of y	ne whether the income you have left over after subtracting all allowed de vour unsecured, nonpriority debt. e box that applies:		
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>The</i> Part 5.	ere is no presumption of abus	e.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, che <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The		
Part 4:	Giv	ve Details About Special Circumstances		
		we any special circumstances that justify additional expenses or adjustme alternative? 11 U.S.C. § $707(b)(2)(B)$ .	ents of current monthly inc	ome for which there is no
	lo. Go	to Part 5.		
		I in the following information. All figures should reflect your average monthly exm. You may include expenses you listed in line 25.	kpense or income adjustment	for each
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.		
	G		Average monthly expense or income adjustment	
			\$	_
	_		\$	-
	_		\$	-
			\$	-
Part 5:	,	n Below		
	By si	gning here, I declare under penalty of perjury that the information on this state	ment and in any attachments	is true and correct.
		/ Latreace Nicole Wesley atreace Nicole Wesley		
	Si	gnature of Debtor 1		
Da	ate <b>Fe</b>	<u>Pbruary 22, 2019</u> M / DD / YYYY		

#### United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

ı re	Latreace Nicole Wesley		Case No.	
		Debtor(s)	Chapter	7
	VER	MATRIX		
e abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and o	correct to the best	of his/her knowledge.

Signature of Debtor

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Big Picture Loans PO Box 704 Watersmeet, MI 49969

BYL Collections 301 Lacey Street Floor 2 West Chester, PA 19382

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Citibank North America Citibank Corp/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank/Sears
Attn: Bankruptcy
Po Box 6275
Sioux Falls, SD 57117

Comenity Bank/Torrid Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Creditors Bureau Assoc 420 College St Macon, GA 31201

Discover Financial Po Box 3025 New Albany, OH 43054 Fingerhut Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395

Genesis Bc/celtic Bank Attn: Bankruptcy 268 South State Street Ste 300 Salt Lake City, UT 84111

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

LendingPoint LLC. Attn: Bankruptcy 1201 Roberts Blvd Suite 200 Kennesaw, GA 30144

Mariner Finance 8211 Town Center Dr Nottingham, MD 21236

Medical Data Systems (MDS) Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Navient Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773 NetCredit 175 W. Jackson Blvd., Suite 1000 Chicago, IL 60604

Nordstrom FSB Attn: Bankruptcy Po Box 6555 Englewood, CO 80155

OneMain Financial Attn: Bankruptcy 601 Nw 2nd Street Evansville, IN 47708

Opportunity Financial, LLC 130 East Randolph Street Suite 3400 Chicago, IL 60601

Pacific Union Financial Attn: Bankruptcy 1603 Lbj Freeway, Suite 500 Farmers Branch, TX 75234

Republic Finance 793 Whitlock Ave Nw Marietta, GA 30064

Rise Attn: Bankruptcy Po Box 101808 Fort Worth, TX 76185

Silverbrooke Homeowners Association, Inc All-In-One Community Management, RA 110 Evans Mill Dr Suite 701 Dallas, GA 30157

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target
Attn: Bankruptcy
Po Box 9475
Minneapolis, MN 55440

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.